

USAC

Schools and Libraries Division
Box 125 Correspondence Unit
80 South Jefferson Road
Whippany, New Jersey 07981

TIME SENSITIVE MATERIAL

01272
FT VANCOUVER REGIONAL LIBRARY
CHER STARKEL
1007 E MILL PLAIN BLVD
VANCOUVER, WA 98663-3504



Universal Service for Schools and Libraries

Adjustment to Funding Commitment and Modification to Receipt of Service Confirmation Form

Estimated Average Burden Hours Per Response: 1.5 hours
(To be completed by Schools and Libraries or Consortia.)

Please read instructions before completing.

1. Name of Billed Entity Applicant (required) Fort Vancouver Regional Library	2. Billed Entity Number (required) 145368	3. Funding Year (required) 7/1/2002- 6/30/2003
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10-Digit Phone Number 360-695-1561 pduitman@fvrl.org	Fax Telephone Number 360-693-2681	E-Mail Address
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5 Contact Person Information Contact Person Name (required) Cher Starkel

Mailing Address (required if different from Item 4) Street Address, P. O. Box or Route Number				City	state	Zip Code
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10-Digit Phone Number 360-906-2327 cstarkel@fvrl.org	Fax Telephone Number 360-906-2326	E-Mail Address
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Persons willfully making false statements on this form can be punished by One or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

NOTICE The collection of information stems from the Commission's authority under Section 254 of the Communications Act of 1934, as amended, 47 U.S.C. § 254. The data in the form will be used to inform the Schools and Libraries Division of the Universal Service Administrative Company that a billed entity, and/or the school and libraries that it represents, wishes to reduce its funding commitment amount on the funding request number level, or has modified the beginning and ending date for services received during the funding year.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the personal information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or potential violation of a FCC statute, regulation, rule or order, your application may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court adjudicative body when (a) the FCC or (b) any employee of the FCC; or (c) the United States Government, is a party in a proceeding before the body or has an interest in the proceeding.

If you do not provide the information requested on the form, your application may be returned without action or your application may be delayed.

The foregoing Notice is required by the Privacy Act of 1914, Pub. L. No. 93-519, December 31, 1974, 5 U.S.C. § 552, and the Paperwork Reduction Act of 1995, Pub. L. No. 104-13, 44 U.S.C. § 3501, et seq.

Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing, and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the reporting burden, to the Federal Communications Commission, Performance Evaluation and Records Management, Washington, D.C. 20554.

Billed Entity Applicant's 500 Number (to be assigned by Fund Administrator) _____

Billed Entity Name FVRL

Contact Name Cner Starnel

Billed Entity Number 453

(Telephone Number 360-906-2327

Block 2: Services Adjustment: Fill in one Block 2 for each Funding Request (FRN) affected. If you are submitting more than one Block 2, please number your pages 2A, 2B, 2C, etc. and write the number in the space provided here: Page 2 ☐

6. Provide the following information about each service cited in Form 471 Block 5, Discount Funding Request, [FRN] for which you want to take one of the following actions:

Remember: **The FRNs listed on this form must be for the same Funding Year as listed in Item 3, 1.**

Start: If you wish to change the Funding Year Service Start Date, you must also file Form 486 in this funding year. This action will NOT result in more funding.

Contract Expiration Date: If you wish to change the ending date for services. This action will not result in more funding but you could combine it with a reduction in funding.

Cancel: If you wish to cancel a Funding Request Number. Please note: This action is irrevocable and the FRN can NOT be reinstated later. This action would allow money to be put back into the Universal Service fund for possible commitment to other applicants.

Reduce: If you wish to reduce the amount of your funding commitment for a particular FRN. This action is irrevocable and the FRN can NOT be increased later. This action would allow money to be put back into the Universal Service fund for possible commitment to other applicants.

The information required can be found in your Funding Commitment Decision Letter (FCDL) pertaining to the Funding Request (FRN) being affected.

To launch the submission of invoices for payment, please file Form 486.

IDENTIFICATION OF THE FRN TO BE ADJUSTED

(A) Form 471 Application Number (required): 291242

(B) Funding Request Number (required): 762187

(C) Billing Account Number (required, if contained in your FCDL): N15EHP5894108

(D) Service Provider Name (required): Verizon

(E) Service Provider SPIN (required): 143004786

ADJUSTMENT TO FRN LISTED ABOVE:

(F) Service Start Date

Original Date (mm/dd/yyyy):

New Date (mm/dd/yyyy):

☐ Change Date

(G) Contract Expiration Date

Original Date (mm/dd/yyyy):

New Date (mm/dd/yyyy):

☐ Change Date

(H) Cancel FRN

Original Commitment Amount:

New Commitment Amount:

☐ Please Cancel

\$0.00

(I) Reduce FRN

Original Commitment Amount
from FCDL:

New Commitment Amount
AFTER Reduction:

☒ Please Reduce

2100.00

104.89

Billed Entity Name FVRL

Contact Name Cher Starkel

Billed Entity Number 145368

Contact Telephone Number 360-906-2327

Block 2: Services Adjustment: Fill in one Block 2 for EACH Funding Request (FRN) affected. If you are submitting more than one Block 2, please number your pages 2A, 2B, 2C, etc. and write the number in the space provided here: Page2 **B**

6. Provide the following information about each service cited in your Form 471 Block 5, Discount Funding Request, [FRN] for which you want to take one of the following actions:

Remember: The FRNs listed on this form must be for the same Funding Year as listed in Item 3, Block 1.

New Start Date: If you wish to change the Funding Year Service Start Date you listed on a previously filed Form 486 in this funding year. This action will NOT result in more funding.

Contract Expiration Date: If you wish to change the ending date for services. This action will not result in more funding but you could combine it with a reduction in funding.

Cancel: If you wish to cancel a Funding Request Number. Please note: This action is irrevocable and the FRN can NOT be reinstated later. This action would allow money to be put back into the Universal Service fund for possible commitment to other applicants.

Reduce: If you wish to reduce the amount of your funding commitment for a particular FRN. This action is irrevocable and the FRN can NOT be increased later. This action would allow money to be put back into the Universal Service fund for possible commitment to other applicants.

The information required can be found in your Funding Commitment Decision Letter (FCDL) pertaining to the Funding Request (FRN) being affected.

To launch the submission of invoices for payment, please file **Form 486**.

IDENTIFICATION OF THE FRN TO BE ADJUSTED

(A) Form 471 Application Number (required): 291242

(B) Funding Request Number (required): 762198

(C) Billing Account Number (required, if contained in your FCDL): 016R207684999

(D) Service Provider Name (required): Sprint

(E) Service Provider SPIN (required): 143002588

ADJUSTMENT TO FRN LISTED ABOVE:

(F) Service Start Date	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
<input type="checkbox"/> Change Date		
(G) Expiration Date	Original Date /dd/	New /dd/
<input type="checkbox"/> Change Date		
(H) Cancel FRN	Original Commitment Amount:	New Commitment Amount:
<input type="checkbox"/> Please Cancel		\$0.00
(I) Reduce FRN	Original Commitment Amount from FCDL:	New Commitment Amount AFTER Reduction:
<input checked="" type="checkbox"/> Please Reduce	2340.00	365.91

Billed Entity Name FVRL

Contact Name Cher Starkel

Billed Entity Number 145368

Contact Telephone Number 360-906-2327

Block 2: Services Adjustment: Fill in one Block 2 for EACH Funding Request (FRN) affected. If you are submitting more than one Block 2, please number **your** pages 2A, 2B, 2C, etc. and write **the** number in **the** space provided here: Page 2 C

6. Provide the following information about each service cited in your Form 471 Block 5, Discount Funding Request, [FRN] for which you want to take one of the following actions:

Remember: The **FRNs** listed on this form must be for the same Funding Year **as** listed in Item 3, Block 1.

New Start Date: If you wish to change the Funding Year Service Start Date you listed on a previously filed Form 486 in this funding year. This action will NOT result in more funding.

Contract Expiration Date: If you wish to change the ending date for services. This action will not result in more funding but you could combine it with a reduction in funding.

Cancel: If you wish to cancel a Funding Request Number. Please note: This action is irrevocable and the FRN can NOT be reinstated later. **This** action would allow money to be put back into the Universal Service fund for possible commitment to other applicants.

Reduce: If you wish to reduce the amount of your funding commitment for a particular FRN. This action is irrevocable and the FRN can NOT be increased later. This action would allow money to be put back into the Universal Service fund for possible commitment to other applicants.

The information required can be found in your Funding Commitment Decision Letter (FCDL) pertaining to the Funding Request (FRN) being affected.

To launch the submission of invoices for payment, please file Form 486.

IDENTIFICATION OF THE FRN TO BE ADJUSTED

(A) Form 471 Application Number (required): 291242

(B) Funding Request Number (required): 772804

(C) Billing Account Number (required, if contained in your FCDL): 541D076341341

(D) Service Provider Name (required): Qwest Interprise

(E) Service Provider SPIN (required): 143000122

ADJUSTMENT TO FRN LISTED ABOVE:

(F) Service Start Date	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
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☐ Change Date

(G) Contract Expiration Date	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
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☐ Change Date

(H) Cancel FRN	Original Commitment Amount:	New Commitment Amount:
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☐ Please Cancel

(I) Reduce FRN	Original Commitment Amount from FCDL:	New Commitment Amount AFTER Reduction:
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☒ Please Reduce

888.00

148.24

Billed Entity Name FVRL

Contact Name Cher Starkel

Billed Entity Number 145368

Contact Telephone Number 360-906-2327

Block 2: Services Adjustment: Fill in one Block 2 for EACH Funding Request (FRN) affected; If you are submitting more than one Block 2, please number your pages 2A, 2B, 2C, etc; and write the number in the space provided here: Page 2

6. Provide the following information about each service cited in your Form 471 Block 5, Discount Funding Request, [FRN] for which you want to take one of the following actions:

Remember: **The FRNs listed on this form must be for the same Funding Year as listed in Item 3, Block 1.**

New Start Date: If you wish to change the Funding Year Service **Start** Date you listed on a previously filed Form 486 in this funding year. **This** action will NOT result in more funding.

Contract Expiration Date: If you wish to change the ending date for services. **This** action will not result in more funding but you could combine it with a reduction in funding.

Cancel: If you wish to cancel a Funding Request Number. Please note: **This** action is irrevocable and the FRN can NOT be reinstated later. This action would allow money to be put back into the Universal Service fund for possible commitment to other applicants.

Reduce: If you wish to reduce the amount of your funding commitment for a particular FRN. **This** action is irrevocable and the FRN can NOT be increased later. **This** action would allow money to be put back into the Universal Service fund for possible commitment to other applicants.

The information required can be found in your Funding Commitment Decision Letter (FCDL) pertaining to the Funding Request (FRN) being affected.

To launch the submission of invoices for payment, please file Form 486.

IDENTIFICATION OF THE FRN TO BE ADJUSTED

(A) Form 471 Application Number (required): 291242

(B) Funding Request Number (required): 773075

(C) Billing Account Number (required, if contained in your FCDL): 10075313

(D) Service Provider Name (required): Verio NW

(E) Service Provider SPIN (required): 143006674

ADJUSTMENT TO FRN LISTED ABOVE:

(F) Service Start Date	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
<input type="checkbox"/> Change Date		

(G) Expiration Date	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
<input type="checkbox"/> Change Date		

(H) Cancel FRN	Original Commitment Amount	New Commitment Amount
<input type="checkbox"/> Please Cancel		\$0.00

(I) Reduce FRN	Original Commitment Amount from FCDL	New Commitment Amount AFTER Reduction:
<input checked="" type="checkbox"/> Please Reduce	10776.00	5388.00

Billed Entity Name FVRL

Contact Name Cher Starkel

Billed Entity Number 145368

Contact Telephone Number **360-906-2327**

Block 2: Services Adjustment: Fill in one Block 2 for EACH Funding Request (FRN) affected. If you are submitting more **than** one Block 2, please number your pages **2A, 2B, 2C**, etc. and write the number in the space provided here: Page 2 | **E** |

6. Provide the following information about each service cited in your Form 471 Block 5, Discount Funding Request, [FRN] for which you want to take one of the following actions:

Remember: The **FRNs** listed **on** this form must be for the same Funding Year as listed in Item 3, Block 1.

New Start Date: If you wish to change the Funding Year Service **Start** Date you listed on a previously filed Form 486 in this funding year. **This** action will NOT result in more funding.

Contract Expiration Date: If you wish to change the ending date for services. This action will not result in more funding but you could combine it with a reduction in funding.

Cancel: If you wish to cancel a Funding Request Number. Please note: This action is irrevocable and the FRN can NOT be reinstated later. This action would allow money to be put back into the Universal Service fund for possible commitment to other applicants.

Reduce: If you wish to reduce the amount of your funding commitment for a particular FRN. This action is irrevocable and the FRN can NOT be increased later. This action would allow money to be put back into the Universal Service fund for possible commitment to other applicants.

The information required can be found in your Funding Commitment Decision Letter (FCDL) pertaining to the Funding Request (FRN) being affected.

To launch the submission of invoices for payment, please file **Form 486**.

IDENTIFICATION OF THE FRN TO BE ADJUSTED

(A) Form 471 Application Number (required): 291242

(B) Funding Request Number (required): 773294

(C) Billing Account Number (required, if contained in your FCDL): N/A

(D) Service Provider Name (required): Verio NW

(E) Service Provider SPIN (required): 143006674

ADJUSTMENT TO FRN LISTED ABOVE:

(F) Service Start Date

Original Date (mm/dd/yyyy):

New Date (mm/dd/yyyy):

☐ Change Date

(G) Contract Expiration Date

Original Date (mm/dd/yyyy):

New Date (mm/dd/yyyy):

☐ Change Date

(H) Cancel FRN

Original Commitment Amount:

New Commitment Amount:

☐ Please Cancel

\$0.00

(I) Reduce FRN

Original Commitment Amount
from FCDL

New Commitment Amount
AFTER Reduction:

☒ Please Reduce

4086.00

2043.00

Billed Entity Name FVRL

Contact Name Cher Starkel

Billed Entity Number 145368

Contact Telephone Number 360-906-2327

F

To launch the submission of invoices for payment, please file Form **486**.

IDENTIFICATION OF THE FRN TO BE ADJUSTED

(A) **Form** 471 Application Number (required):291242

(B) Funding Request Number (required): 773313

(C) Billing Account Number (required, if contained in your FCDL):N/A

(D) Service Provider Name (required):Verio NW

(E) Service Provider SPIN (required):143006674

ADJUSTMENT TO FRN LISTED ABOVE:

(F) Service Start Date	Original Date (mm/dd/yyyy):	New Date (mm/dd/yyyy):
------------------------	-----------------------------	------------------------

☐ ChangeDate

(G) Contract Expiration Date	Original Date (mm/dd/yyyy):	New Date (dd/yy)
------------------------------	-----------------------------	------------------

☐ ChangeDate

☐ Please Cancel

\$0.00

(I) ReduceFRN

Original Commitment Amount
from FCDL:

New Commitment Amount
AFTER Reduction:

4086.00

2043.00

☒ Please Reduce

Billed Entity Name FVRL

Contact Name Cher Starkel

Billed Entity Number 145368

Contact Telephone Number 360-906-2327

Block 2: Services Adjustment: Fill in one Block 2 for EACH Funding Request (FRN) affected. If you are submitting more than one Block 2, please number your pages 2A, 2B, 2C, etc. and write the number in the space provided here: Page 2 **G**

6. Provide the following information about each service cited in your Form 471 Block 5, Discount Funding Request, [FRN] for which you want to take one of the following actions:

Remember: The FRNs listed on this form must be for the same Funding Year as listed in Item 3, Block 1.

New Start Date: If you wish to change the Funding Year Service Start Date you listed on a previously filed Form 486 in this funding year. This action will NOT result in more funding.

Contract Expiration Date: If you wish to change the ending date for services. This action will not result in more funding but you could combine it with a reduction in funding.

Cancel: If you wish to cancel a Funding Request Number. Please note: This action is irrevocable and the FRN can NOT be reinstated later. This action would allow money to be put back into the Universal Service fund for possible commitment to other applicants.

Reduce: If you wish to reduce the amount of your funding commitment for a particular FRN. This action is irrevocable and the FRN can NOT be increased later. This action would allow money to be put back into the Universal Service fund for possible commitment to other applicants.

The information required can be found in your Funding Commitment Decision Letter (FCDL) pertaining to the Funding Request (FRN) being affected.

To launch the submission of invoices for payment, please file Form 486.

IDENTIFICATION OF THE FRN TO BE ADJUSTED

(A) Form 471 Application Number (required): 291242

(B) Funding Request Number (required): 773817

(C) Billing Account Number (required, if contained in your FCDL): 541d076340340

(D) Service Provider Name (required): Qwest Interprise

(E) Service Provider SPIN (required): 143000132

ADJUSTMENT TO FRN LISTED ABOVE:

(F) Service Start Date

Original Date (mm/dd/yyyy):

New Date (mm/dd/yyyy):

☐ Change Date

(G) Contract Expiration Date

Original Date (mm/dd/yyyy):

New Date (mm/dd/yyyy):

☐ Change Date

(H) Cancel FRN

Original Commitment Amount:

New Commitment Amount:

☐ Please Cancel

\$0.00

(I) Reduce FRN

Original Commitment Amount
from FCDL:

New Commitment Amount
AFTER Reduction:

☒ Please Reduce

1056.00

83.43

Billed Entity Name **Fort Vancouver Regional Library**Contact Name **Cher Starkel**Billed Entity Number **145368**Contact Telephone Number **360-906-2327****Block 3: Certification**

7. I certify that I **am** authorized to submit **this** Form **on** behalf of the above-named billed entity applicant, that I have examined **this** request, and that, to the best of **my** knowledge, information, and belief, all statements of fact contained herein are true.
8. I understand that the discount level used for shared services is conditional, for future years, upon ensuring **that** the most disadvantaged schools and libraries that are treated as sharing in the services receive an appropriate share of benefits **from** those services.
9. I recognize that I may be audited pursuant to **this** application and will retain for five years any and all records that I rely **upon** to fill **in this form**.

10. Signature (original ink signature required)

11. Date (required) November 18, 2002

*Patricia Duitman*12. Printed **name** of authorized person (required) Patricia Duitman

13. Title or position of authorized person (required) Associate Director

14. Telephone number of authorized person (required) 360-695-1561

15. E-Mail address of authorized person (required, if available) pduitman@fl.org

16. Address of authorized person (required) 1007 E Mill Plain Blvd, Vancouver, WA 98663

A paper copy of this form, with an original signature in Block 3, Item 10 should be mailed to:

**SLD-Form 500
P. O. Box 7026
Lawrence, Kansas 66044-7026**

If sent by express delivery services or U.S. Postal Service, Return Receipt Requested, the form should be mailed to:

**SLD-Form 500
c/o Ms. Smith
3833 Greenway Drive
Lawrence, Kansas 66046
888-203-8100**



Form 500 letter

Universal Service Administrative Company
Schools & Libraries Division

FORM 500 NOTIFICATION LETTER
(Funding Year 2002: 07/01/2002 - 06/30/2003)

January 06, 2003

FT VANCOUVER REGIONAL LIBRARY
CHER STARKEL
1007 E MILL PLAIN BLVD
VANCOUVER, WA 98663

Re: **Form 500 Application Number: 203159**
Applicant's Form 500 Identifier: **FVRLYR5**

This letter is to notify you that the Schools and Libraries Division (SLD) of the Universal Service Administrative Company has received and accepted an FCC Form 500 (Adjustment to Funding Commitment and Modification to Receipt of Service Confirmation Form) from you. This notification is to confirm the information that you provided. This information is being shared with the Service Provider whose SPIN you identified on the affected Funding Request (FRN).

NOTICE ON SERVICE START DATE

There may be some situations where the New Service Start Date as reflected on this letter has been changed from what you indicated on the Form 500. The Service Start Date may not be before the Allowable Vendor Selection/Contract Date (AVSCD) from the Form 470 cited for this FRN on the Form 471. Additionally, applicants cannot use the Form 500 to change the Service Start Date from an adjusted Service Start Date on the Form 486. You will know that a change has been made if there is an asterisk (*) next to the New Service Start Date. It is important that you and the service provider both recognize that the SLD should be invoiced and the SLD may direct disbursement of the discounts only on eligible, approved services actually delivered and installed after the New Service Start Date indicated on this letter.

TO APPEAL THE SERVICE START DATE CHANGE DECISION

If you wish to appeal the Service Start Date change(s) indicated in this letter, your appeal must be RECEIVED BY THE SCHOOLS AND LIBRARIES DIVISION (SLD) WITHIN 60 DAYS OF THE DATE ON THIS LETTER. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

1. Include the name, address, telephone number, fax number, and e-mail address (if available) for the person who can most readily discuss this appeal with us.
2. State outright that your letter is an appeal. Identify which FRN Service Start Date change you are appealing. Indicate the relevant funding year and the date of this Form 500 Notification Letter. Your letter of appeal must also include the relevant Funding Request Number(s), the applicant name, the Form 471 Application

Number, and the Billed Entity Number from your Form 500.

3. Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep copies of your correspondence and documentation.
4. Provide an authorized signature on your letter of appeal.

If you are submitting your appeal on paper, please send your appeal to: Letter of Appeal, Schools and Libraries Division Box 125 - Correspondence Unit, 80 South Jefferson Road, Whippany, NJ 07981. Additional options for filing an appeal can be found in the "Appeals Procedure" posted in the Reference Area of the SLD web site <www.sl.universalservice.org> or by calling the Client Service Bureau at 1-888-203-8100.

While we encourage you to resolve your appeal with the SLD first, you have the option of filing an appeal directly with the Federal Communications Commission (FCC). You should refer to CC Docket Nos 46-45 and 97-21 on the first page of your appeal to the FCC. Your appeal must be RECEIVED BY THE FCC WITHIN 60 DAYS OF THE ABOVE DATE ON THIS LETTER. Failure to meet this requirement will result in automatic dismissal of your appeal. Further information and options for filing an appeal directly with the FCC can be found in the "Appeals Procedure" posted in the Reference Area of the SLD web site or by calling the Client Service Bureau. We strongly recommend that you use the electronic filing options because of continued substantial delays in mail delivery to the FCC. If you are submitting your appeal via United States Postal Service send to: FCC, Office of the Secretary, 445 12th Street SW, Washington, DC 20554.

NOTICE ON INVOICING

INVOICING DEADLINES: After a Form 486 has been properly filed, the SLD must receive an invoice from either the applicant or the service provider in order to make payments for approved discounts on eligible services. Form 472, Billed Entity Applicant Reimbursement (BEAR) Form, is filed by the applicant; Form 474, Service Provider Invoice Form, is filed by the service provider. Invoices must be postmarked no later than 120 calendar days after the last date to receive service or 120 calendar days after the date of the Form 486 Notification Letter, whichever is later. If an invoice is postmarked after the later of those two dates, payment will be denied.

Please note that the SLD encourages service providers to work with their customers to establish whether discounts will appear on bills or whether customers prefer a reimbursement process. The SLD will process either reimbursements based on Form 472 (BEAR) or discounts based on Form 474 (SPIF) for a given FRN. Once established, however, the selected process - SPIFs or BEARS - must be used consistently for the entire funding year.

NOTE: The SLD will base the billing mode (reimbursement or discounting) on the first, invoice type that it processes for payment. It is therefore imperative for the service provider and the customer to establish together the preferred invoicing mode.

EXPLANATION OF INFORMATION PROVIDED IN THE FORM 500 NOTIFICATION LETTER

On the following pages is a list of FRNs for which you have notified us you are making a modification. To help you understand this list, the following definitions are provided. Most of these are identical to the definitions that were included in the Funding Commitment Decision Letters (FCDL) earlier sent to you.

Funding Request Number (FRN): A Funding Request Number is assigned by the SLD to each Block 5 of your Form 471 once an application has been processed. This number is used to report to applicants and service providers the status of individual discount funding requests submitted on a Form 471.

Form 471 Application Number: A unique identifier assigned to a Form 471 application by the SLD.

Service Provider Name: The name of the service provider that you identified as providing the service included in this FRN.

Service Provider Identification Number: The unique number assigned by USAC to the service provider you identified as providing the service included in this FRN.

Billing Account Number: The account number that you have established with your service provider for billing purposes. This will be present only if a Billing Account Number was provided on Form 471.

Service Start Date Change (SHOWN ONLY IF REQUESTED): The New Service Start Date as indicated on the Form 500. If this date is marked with an asterisk, it was changed by

SLD to be in compliance with program rules and an explanation for the change has been provided. This date as shown is controlling and USAC will not reimburse discounts on services delivered prior to this date.

Service Start Date Change Explanation (SHOWN ONLY IF RELEVANT): If the Service Start Date is marked with an asterisk, this field will appear to explain why SLD changed the date. One of the following explanations may appear:

AVSCD: The Service Start Date may not be before the Allowable Vendor Selection/Contract Date (AVSCD) from the Form 470 cited for this FRN on the Form 471. If you indicated an earlier SSD on the Form 486, SLD changed the SSD to the AVSCD.

486 DEADLINE: Applicants can not use the Form 500 to change the Service Start Date from an adjusted Service Start Date on the Form 486. If you indicated an earlier SSD on the Form 500, SLD changed the SSD to what was reflected on the Form 486 Notification letter sent to both the applicant and the service provider.

Contract Expiration Date Change (SHOWN ONLY IF REQUESTED): The Original Contract Expiration Date as shown on the Form 471 and the New Contract Expiration Date. A contract extension does not result in more money being committed to the FRN; the funding remains at the level provided in the Funding Commitment Decision Letter, but an extension may provide more time for the provision of service.

Cancel FRN (SHOWN ONLY IF REQUESTED): The Original Commitment Amount as shown in the Funding Commitment Decision Letter (FCDL) and a New Commitment Amount of \$0.00. Canceling an FRN is an irrevocable action.

Reduce FRN (SHOWN ONLY IF REQUESTED): The Original Commitment Amount as shown in the Funding Commitment Decision Letter (FCDL) and the New Commitment Amount After Reduction. The New Commitment Amount will become the new cap for the FRN. Reducing an FRN is an irrevocable action.

FORM 500 NOTIFICATION LETTER FUNDING COMMITMENT SYNOPSIS
(Funding Year 2002)

Fundin Request Number: 762187
Form 4% Application Number: 291242
Service Provider Name: Verizon - Northwest Inc
Service Provider Identification Number: 143004786
Billing Account Number: N15EHP5894108
Contract Expiration Date Change: 06/30/2003
Reduce FRN: \$1,239.00; \$104.89

Fundin Request Number: 762198
Form 4% Application Number: 291242
Service Provider Name: Sprint/United Tele hone - Northwest
Service Provider Identification Number: 193002588
Billing Account Number: 016R207684999
Contract Expiration Date Chan e: 06/30/2003
Reduce FRN: \$1,661.40; \$365.98

Fundin Request Number: 772804
Form 4% Application Number: 291242
Service Provider Name: ~~Owest~~ Interprise America, Inc. fka US West Interprise Americ
Service Provider Identification Number: 143000132
Billing Account Number: 541 D07 6341 341
Contract Expiration Date Change: 06/30/2003
Reduce FRN: \$523.92; \$148.24

Fundin Request Number: 773075
Form 4% Application Number: 291242
Service Provider Name: Verio fka Verio Northwest/Portland
Service Provider Identification Number: 143006674
Billing Account Number: 10075313
Contract Expiration Date Change: 06/30/2003
Reduce FRN: \$6,573.36; \$5,388.00

Fundin Request Number: 773294
Form 4% Application Number: 291242
Service Provider Name: Verio fka Verio Northwest/Portland
Service Provider Identification Number: 143006674
Billing Account Nunber: ti/A
Contract Expiration Date Change: 06/30/2003
Reduce FRN: \$2,860.20; \$2,043.00

Fundin Request Number: 773313
Form 4% Application Number: 291242
Service Provider Name: Verio fka Verio Northwest/Portland
Service Provider Identification Number: 143006674
Billing Account Nunber: N/A
Contract Expiration Date Change: 06/30/2003
Reduce FRN: \$2,655.90; \$2,043.00

Funding Request Number: 773017
Form 471 Application Number: 291242
Service Provider Name: ~~Owest~~ Interprise America, Inc. fka US West Interprise Americ
Service Provider Identification Number: 143000132
Billing Account Number: 541 D07 6340 340
Contract Expiration Date Change: 06/30/2003
Reduce FRN: \$749.76; \$83.43

2nd 486 form



Universal Service Administrative Company
Schools & Libraries Division

FORM 486 NOTIFICATION LETTW
(Funding Year 2002: 07/01/2002 - 06/30/2003)

February 26, 2003

FT VANCOUVER REGIONAL LIBRARY
CHER STARKEL
1007 E MILL PLAIN BLVD
VANCOUVER, WA 98663-3504

Re: Form 486 Application Number: 206770
Applicant's Form 486 Identifier: FVRLYR5-1

This letter is to notify you that the Schools and Libraries Division (SLD) of the Universal Service Administrative Company has received and accepted an FCC Form 486 (Receipt of Service Confirmation Form) from you. This notification is to confirm the information that you provided. This information is being shared with 'the service provider whose SPIN you identified on the affected Funding Request Number(s) (FRN).

NOTICE ON SERVICE START DATE

There may be some situations where one or more Service Start Dates as reflected on this letter have been changed from what you indicated on the Form 486. Such changes are made by the SLD to be in compliance with program rules. You will know that a change has been made if there is an asterisk next to the Service Start Date. If the SLD changed the Service Start Date, that may have triggered a reduction in the funding commitment if the change of Service Start Date reduced the number of months for which discounts on recurring services could be provided. Whatever Service Start Date and funding commitment amount are listed, it is important that you and the Service Provider both recognize that the SLD should be invoiced and the SLD may direct disbursement of the discounts only on eligible, approved services actually delivered and installed on or after the Service Start Date indicated on this letter.

TO APPEAL THE SERVICE START DATE/FUNDING COMMITMENT CHANGE DECISION

If you wish to appeal the Service Start Date change(s) and/or funding commitment adjustment(s) indicated in this letter, your appeal must be RECEIVED BY THE SCHOOLS AND LIBRARIES DIVISION (SLD) WITHIN 60 DAYS OF THE DATE ON THIS LETTER. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

1. Include the name, address, telephone number, fax number, and e-mail address (if available) for the person who can most readily discuss this appeal with us.
2. State outright that your letter is an appeal. Identify which FRN Service Start Date change or Funding Commitment adjustment you are appealing. Indicate the relevant funding year and the date of this Form 486 Notification Letter. Your letter of.

appeal must also include the relevant Funding Request Number(s), the applicant name, the Form 471 Application Number, and the Billed Entity Number from your Form 486.

3. Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep copies of your correspondence and documentation.
4. Provide an authorized signature on your letter of appeal.

If you are submitting your appeal on paper, please send your appeal to:
Letter of Appeal, Schools and Libraries Division, Box 125 - Correspondence Unit,
80 South Jefferson Road, Whippany, NJ 07981. Additional options for filing an appeal
can be found in the "Appeals Procedure" posted in the Reference Area of the SLD web site
<www.sl.universalservice.org> or by calling the Client Service Bureau at 1-888-203-8100.

While we encourage you to resolve your appeal with the SLD first, you have the option of filing an appeal directly with the Federal Communications Commission (FCC). You should refer to CC Docket Nos. 96-45 and 97-21 on the first page of your appeal to the FCC. Your appeal must be RECEIVED BY THE FCC WITHIN 60 DAYS OF THE ABOVE DATE ON THIS LETTER. Failure to meet this requirement will result in automatic dismissal of your appeal. Further information and options for filing an appeal directly with the FCC can be found in the "Appeals Procedure" posted in the Reference Area of the SLD web site or by calling the Client Service Bureau. We strongly recommend that you use the electronic filing options because of continued substantial delays in mail delivery to the FCC. If you are submitting your appeal via United States Postal Service, send to: FCC, Office of the Secretary, 445 12th Street SW, Washington, DC 20554.

NOTICE ON CIPA COMPLIANCE FOR FUNDING YEAR 2002 AND FUTURE FUNDING YEARS

Although your Form 486 has been fully data entered, the SLD will continue to investigate the CIPA compliance status of each of the entities represented on each FRN listed. If the SLD discovers that the reported CIPA compliance status for an entity is not valid, based on what was reported on your Forms 486 from prior Funding Years, there is a possibility that invoices will be denied for services being delivered to the affected entities.

NOTICE ON INVOICING

INVOICING DEADLINES: After a Form 486 has been properly filed, the SLD must receive an invoice from either the applicant or the service provider in order to make payments for approved discounts on eligible services. Form 472, Billed Entity Applicant Reimbursement (BEAR) Form, is filed by the applicant; Form 474, Service Provider Invoice Form, is filed by the service provider. Invoices must be postmarked no later than 120 calendar days after the last date to receive service or 120 calendar days after the date of this Form 486 Notification Letter, whichever is later. If an invoice is postmarked after the later of those two dates, payment will be denied.

Please note that the SLD encourages service providers to work with their customers to establish whether discounts will appear on bills or whether customers prefer a reimbursement process. The SLD will process either reimbursements based on Form 472 (BEAR) or discounts based on Form 474 (SPIF) for a given FRN. Once established, however, the selected process - SPIFs or BEARs - must be used consistently for the entire Funding Year.

NOTE: The SLD will base the billing mode (reimbursement or discounting) on the first invoice type that it processes for payment. It is therefore imperative for the service provider and the customer to establish together the preferred invoicing mode.

REVIEW OF INVOICES FOR COMPLIANCE WITH PROGRAM RULES

Once an invoice is in the SLD system, it is reviewed (electronically and, in some cases, manually) for compliance with program rules. Applicants who submit BEARs or service providers who submit SPIFs may be contacted by our Program Integrity Assurance team to provide information in support of the invoice.

EXPLANATION OF INFORMATION PROVIDED IN THE FORM 486 NOTIFICATION LETTER

On the following pages is a list of ~~FRNs~~ for which you have notified us of a Service Start Date. To help you understand this list, the following definitions are provided. Most of these are identical to the definitions that were included in the Funding Commitment Decision Letters (FCDL) sent to you earlier.

Funding Request Number (FRN): A Funding Request Number ~~is assigned~~ by the SLD to each Block 5 of your Form 471 once an application has been ~~processed~~. This number is used to report to applicants and service providers the status of individual discount funding requests submitted on a Form 471.

Form 471 Application Number: A ~~unique~~ identifier assigned to a Form 471 application by the SLD from Block 1 of the Form 471.

Service Provider Name: The name of the service provider that you identified as providing the service included in this FRN.

Service Provider Identification Number: The unique number assigned by USAC to the service provider you identified as providing the service included in this ~~FRN~~.

Billing Account Number: The account number that you have established with your service provider for billing purposes. This will be present only if a ~~Billing~~ Account Number was provided on the Form 471.

Service Start Date: The Service Start Date (SSD) as indicated on the Form 486. If this date is marked with an asterisk, it was changed by the SLD to be in compliance with program rules and an explanation for the change has been provided. This date as shown is controlling and USAC will not reimburse discounts on services delivered prior to this date.

Service Start Date Change Explanation (SHOWN ONLY IF RELEVANT): If the Service Start Date is ~~marked~~ with an asterisk, this field will explain why the SLD changed the date. One of the following explanations may appear:

AVSCD: The Service Start Date may not be before the Allowable Vendor Selection/Contract Date (AVSCD) from the Form 470 cited for this FRN on the Form 471. If you indicated an earlier SSD on the Form 486, the SLD changed the SSD to the AVSCD.

120-DAY 486 DEADLINE: Forms 486 must be postmarked no later than 120 days after the start of services or no later than 120 days after the date of the Funding Commitment Decision Letter (FCDL), whichever is later. If the Form 486 is ~~postmarked~~ after the later of those two dates, the SLD changed the SSD to the date 120 days before the Form 486 postmark. That date will become the start date for discounted services. You are advised to keep proof of the date of mailing of your form(s).

Adjusted Funding Commitment (SHOWN ONLY IF RELEVANT): If the SLD changed the Service Start Date, that may have triggered a reduction in the funding commitment if the change of SSD reduced the number of months for which discounts on recurring services could be provided. This field will only appear if there is a reduction to the funding commitment amount.

FORM 486 NOTIFICATION LETTER FUNDING COMMITMENT SYNOPSIS
(Funding Year 2002)

Funding Request Number: 762187
Form 471 Application Number: 291242
Service Provider Name: Verizon Northwest Inc
Service Provider Identification Number: 143004786
Billing Account Number: N15EHP5894108
Service Start Date: 10/07/2002*
Service Start Date Change Explanation: 120-DAY 486 DEADLINE
Adjusted Funding Commitment: \$0.00

Funding Request Number: 762198
Form 471 Application Number: 291242
Service Provider Name: Sprint/United Telephone - Northwest
Service Provider Identification Number: 143002588
Billing Account Number: 016R207684999
Service Start Date: 10/07/2002*
Service Start Date Change Explanation: 120-DAY 486 DEADLINE
Adjusted Funding Commitment: \$0.00

Funding Request Number: 772804
Form 471 Application Number: 291242
Service Provider Name: Qwest Interprise America, Inc. fka US West Interprise Americ
Service Provider Identification Number: 143000132
Billing Account Number: 541 D07 6341 341
Service Start Date: 10/07/2002*
Service Start Date Change Explanation: 120-DAY 486 DEADLINE
Adjusted Funding Commitment: \$17.26

Funding Request Number: 773075
Form 471 Application Number: 291242
Service Provider Name: Verio fka Verio Northwest/Portland
Service Provider Identification Number? 143006674
Billing Account Number: 10075313
Service Start Date: 10/07/2002*
Service Start Date Change Explanation: 120-DAY 486 DEADLINE
Adjusted Funding Commitment: \$3,744.66

Funding Request Number: 773817
Form 471 Application Number: 291242
Service Provider Name: Qwest Interprise America, Inc. fka US West Interprise Americ
Service Provider Identification Number: 143000132
Billing Account Number: 541 D07 6340 340
Service Start Date: 10/07/2002*
Service Start Date Change Explanation: 120-DAY 486 DEADLINE
Adjusted Funding Commitment: \$0.00